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PET	ΓΙΤΙΟ	N FOR	EXTENSION OF TIME	UNDER 37	CFR 1.136(a)	Docket Number	(Optional)
FY 2005						RLL-283US	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)						Filed 12/23/2002	
Application Number 10/540/062 Fill For FLAVAXATE DERIVATIVES AS MUSCARINIC RECEPTOR ANTAGONISTS							12
For j	FLAVA	XATE DE	RIVATIVES AS MUSCARINIC	RECEPTOR A	NTAGONISTS	_	
Art Unit TBA						Examiner TBA	
appli	cation.		er the provisions of 37 CFR 1.1				
The	reques	ted extens	ion and fee are as follows (che	ck time period d	esired and enter th	ne appropriate fe	e below):
	<b>5</b> 21			<u>Fee</u>	Small Entity	<u>Fee</u>	
	$\boxtimes$	One mor	nth (37 CFR 1.17(a)(1))	\$120	\$60	\$	120
		Two mor	oths (37 CFR 1.17(a)(2))	\$450	\$225	\$	0
		Three me	onths (37 CFR 1.17(a)(3))	\$1020	\$510	\$	0
		Four mo	nths (37 CFR 1.17(a)(4))	\$1590	\$795	\$	0
		Five mor	nths (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	0
$\Box$	Analia	ant alaima	amali antihuatatua Saa 27 CE	TD 4 07			
	Applicant claims small entity status. See 37 CFR 1.27.						
Ш	A check in the amount of the fee is enclosed.						
Payment by credit card. Form PTO-2038 is attached.  The Director has already been authorized to charge fees in this application to a Deposit Account.  The Director is hereby authorized to charge any fees which may be required, or credit any overparts.							
						redit any overpa	/ment.
	to Deposit Account Number 50-0912 I have enclosed a duplicate copy of this sheet.						
	WARNING: Information on this form may become public. Credit card information should not be included on this form.						
	ionii.			02/02	'2006 Llandgra 00(	00018 500912	10540062
I am	the		applicant/inventor	03 FC	•		1001000
assignee of record of the entire interest. See 37 CFR 3.71.							
	Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).						
	attorney or agent of record. Registration Number 42,648						
	attorney or agent under 37 CFR 1.34.  Registration number if acting order 37 CFR						
	The Ell				January 31, 2006		
	Signature				Date		
_	George E. Heibel				609 720-5334		
	Typed or printed name				Te	elephone Number	
NOTE	E: Signa	tures of all than one s	the inventors or assignees of recor ignature is required, see below.	d of the entire inter	est or their represen	tative(s) are requir	ed. Submit multipl
	otal of	1	forms are submitted.	, .			

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.